

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
10 / 588329

FILING DATE

APPLICANT(S)

Oct. 34

Serial No.

CLAIMS

Att. 37

Att. 37

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
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TOTAL IND.	2		3			
TOTAL DEP.	18	←	17	←		
TOTAL CLAIMS	20		30			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
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TOTAL DEP.						
TOTAL CLAIMS						